

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) SCH-2208										
	In re Application of Kai Licha et al.											
	Application Number 10/762,582	Filed January 23, 2004										
	For HYDROPHILIC, THIOL-REACTIVE CYANINE DYES AND CONJUGATES THEREOF WITH BIOMOLECULES FOR FLUORESCENCE DIAGNOSIS											
	Group Art Unit 1654	Examiner Andrew D. Kosar										
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner dated, <u>July 26, 2007</u>, rejecting the following claims: <u>1, 4, 18, 19, 35 and 41</u>.</p> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ <u>510.00</u>.</p> <p><input checked="" type="checkbox"/> The fee shown above is reduced by \$500.00 of Notice of Appeal fee paid on November 28, 2006, and the resulting fee is: \$ <u>10.00</u>.</p> <p><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>13-3402</u> . I have enclosed a duplicate copy of this sheet.</p> <p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <table style="width: 100%; border: none;"><tr><td style="width: 60%; vertical-align: top; padding-top: 20px;">I am the</td><td style="width: 40%; text-align: center; vertical-align: bottom; padding-top: 20px;">/Csaba Henter/ _____ Signature</td></tr><tr><td><input type="checkbox"/> applicant/inventor.</td><td></td></tr><tr><td><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.</td><td></td></tr><tr><td><input checked="" type="checkbox"/> attorney or agent of record.</td><td style="text-align: center; vertical-align: bottom;">Csaba Henter, Reg. No. 50,908 _____ Typed or printed name</td></tr><tr><td><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a)._____.</td><td style="text-align: center; vertical-align: bottom;">October 26, 2007 _____ Date</td></tr></table> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p>			I am the	/Csaba Henter/ _____ Signature	<input type="checkbox"/> applicant/inventor.		<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.		<input checked="" type="checkbox"/> attorney or agent of record.	Csaba Henter, Reg. No. 50,908 _____ Typed or printed name	<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a)._____.	October 26, 2007 _____ Date
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<input type="checkbox"/> *Total of _____ forms are submitted.												